

ORIGINAL

BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF HAWAII

In the Matter of the Application) DOCKET NO. 2009-0049
)
 of)
)
 WAI'OLA O MOLOKA'I, INC.)
)
 For review and approval of rate)
 increases; revised rate schedules;)
 and revised rules.)
)

Public Utilities
Companies Act

2010 MAY -5 A 11:28

FILED

**INTERVENOR COUNTY OF MAUI'S
MOTION FOR ISSUANCE OF SUBPOENAS**

MEMORANDUM IN SUPPORT OF MOTION

DECLARATION OF JEANNETTE H. CASTAGNETTI

EXHIBITS 1 - 4

CERTIFICATE OF SERVICE

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DEPARTMENT OF THE CORPORATION
COUNSEL

County of Maui
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Wailuku, Hawaii 96793
Telephone: (808) 270-7740
Facsimile: (808) 270-7152
Attorneys for County of Maui

BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF HAWAII

In the Matter of the Application)	DOCKET NO. 2009-0049
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WAI'OLA O MOLOKA'I, INC.)	
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For review and approval of rate)	
increases; revised rate schedules;)	
and revised rules.)	
_____)	

**INTERVENOR COUNTY OF MAUI'S
MOTION FOR ISSUANCE OF SUBPOENAS**

COUNTY OF MAUI, by and through its attorneys, BRIAN T. MOTO, Corporation Counsel, JANE E. LOVELL, Deputy Corporation Counsel, and BRONSTER HOSHIBATA, moves this Commission for issuance of subpoenas requiring the attendance of two former officers and employees of the applicant, Wai'ola O Moloka'i, Inc., and its parent company, Molokai Properties, Ltd., to testify before the Commission.


As set forth in the attached Memorandum in Support of Motion, the testimony of these witnesses, Daniel Orodener and Harold Edwards, is material and relevant to the issues presented in this rate making proceeding.

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This motion is brought pursuant to Sections 6-61-38 and 41 of the
Hawaii Administrative Rules.

DATED: Honolulu, Hawaii, May 5, 2010.



MARGERY S. BRONSTER
JEANNETTE H. CASTAGNETTI
Bronster Hoshibata

BRIAN T. MOTO
JANE E. LOVELL
EDWARD S. KUSHI, JR.
Department of the Corporation Counsel

Attorneys for County of Maui

BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF HAWAII

In the Matter of the Application)	DOCKET NO. 2009-0049
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WAI'OLA O MOLOKA'I, INC.)	
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For review and approval of rate)	
increases; revised rate schedules;)	
and revised rules.)	
_____)	

MEMORANDUM IN SUPPORT OF MOTION

I. INTRODUCTION

The County of Maui requests that the Commission issue subpoenas compelling the attendance of two former and current officers and employees of applicant Wai'ola O Moloka'i, Inc. ("WOM") and its parent company, Molokai Properties, Ltd. ("MPL"), to testify at the evidentiary hearing currently scheduled for May 19 - 21, 2010. The testimony of these witnesses, Daniel Orodenker¹ and Harold Edwards, is relevant and material to whether the rate increases requested by WOM are just and reasonable.

II. ARGUMENT

HAR § 6-61-38(a) states that "any party may request the issuance of a subpoena requiring the attendance of a witness to testify before the

¹ Upon information and belief, Daniel Orodenker is an employee of the company until July 1, 2010.

commission.” The rule further provides that the request “shall be in writing and shall state the reasons why the testimony of the witness is material and relevant to the issues in the proceeding.”

Pursuant to the Order Approving Proposed Procedural Order, as Modified, filed November 6, 2009, the issues in this permanent rate increase application proceeding are as follows:

1. Are WOM’s proposed rate increases just and reasonable?
 - a. Are the proposed tariffs, rates and charges just and reasonable?
 - b. Are the revenue forecasts for the July 1, 2009 to June 30, 2010 Test Year (“Test Year”) at present rates and proposed rates just and reasonable?
 - c. Are the projected operating expenses for the Test Year just and reasonable?
 - d. Is the projected rate base for the Test Year just and reasonable?
 - e. Is the rate of return requested fair?

Order at 4; Exhibit 1 attached to Order at 1-2.

The testimony of Daniel Orodener and Harold Edwards is necessary to ensure that the evidentiary record is fully developed. Thus far, the only testimony offered by WOM is the direct testimony of Robert O’Brien, a

consultant retained by the utility to justify the permanent rate increase WOM seeks. Mr. O'Brien is not an employee of WOM or WOM's parent company, MPL. Yet, he is the only "authority" who signed off as the sponsor of various Responses to Information Requests on behalf of WOM.²

This proceeding is directly related to WOM's sister company's rate application, Molokai Public Utilities, Inc. ("MPU"), because WOM buys water from MPU. *In the Matter of the Application of Molokai Public Utilities, Inc., Docket No. 2009-0048* is currently pending before the Commission and scheduled for evidentiary hearing on May 11 - 13, 2010.

In MPU's rate case, Intervenor West Molokai Association filed a Motion for Issuance of Subpoenae on April 29, 2010 requesting that the Commission order Harold Edwards and Daniel Orendenker to testify in MPU's rate hearing. The County incorporates by reference the reasons articulated by West Molokai Association for the issuance of the subpoenas to Daniel Orendenker and Harold Edwards in MPU's proceeding.

² At the prehearing conference held on April 27, 2010, counsel for WOM indicated that Peter Nicholas would be present at the evidentiary hearing for WOM. Although Mr. Nicholas will be present, the County believes that Mr. Nicholas, who did not manage the day to day operations of WOM, has only partial knowledge of the issues related to this rate proceeding, thus the need to have Harold Edwards and Danniell Ordenker, who, upon information and belief, managed the day to day operations of WOM and MPL, attend the evidentiary hearing.

The testimony in MPU's proceeding is relevant and material to WOM's proceeding because MPU sells water to WOM. One of the relevant and material issues in MPU's proceeding is lost and unaccounted for water. Although this Commission previously ordered MPU to provide quarterly status reports on the progress of its facility upgrade, including construction of new transmission lines to reduce water loss or upgrade its system,³ MPU does not dispute that it has not been able to resolve the water loss issues. *See Rebuttal Testimony of Robert L. O'Brien at 18:1 - 15 ("[MPU] . . . was not able to quantify the water used for treatment or have any data to support the sources of the other water losses.").*

Because MPU sells its water to WOM, the costs and water losses associated with MPU have an impact on and directly affect WOM's operating costs and requested rate increases. Thus, the testimony is relevant, material, and overlaps with MPU's rate proceeding. As two former/current officers and employees of MPU and WOM,⁴ Harold Edwards and Daniel Orodenker would have personal knowledge of the circumstances surrounding MPU's efforts to

³ *Docket No. 02-0371; Decision and Order No. 20342 filed July 18, 2003 at paragraph 6.*

⁴ See Exhibits 2 and 3 attached reflecting that Harold Edwards was the Senior Vice President of WOM from 2000 to 2006, Senior Vice President of MPU from 2001 to 2005, and Daniel Orodenker was the Secretary of WOM in 2007 and Secretary of MPU from 2006-2007, respectively. Also during the relevant time period, Harold Edwards was MPL's Vice President from 2000 to 2006. Daniel Orodenker was MPL's Secretary and General Manager from 2007 to the present. See Exhibit 4.

account for the water losses and any measures taken to correct the problems previously pointed out by the Commission.⁵

The County is concerned that if Daniel Orodener and Harold Edwards are not allowed to testify in WOM's proceeding, then the County will also be precluded from seeking judicial notice of the testimony presented in MPU's proceeding. In all likelihood, the County expects to cross-examine Daniel Orodener and Harold Edwards in MPU's proceeding and will then ask the Commission to take judicial notice of their testimony in WOM's proceeding. Because their testimony is relevant, material, and overlaps in both proceedings, the County will endeavor to cross-examine these witnesses in MPU's proceeding to avoid duplicative testimony in WOM's proceeding. If, however, the Commission does not allow these witnesses to testify in MPU's proceeding, despite the overlapping and inter-related issues, then the County

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⁵ Since Harold Edwards was the officer and employee of MPU who submitted quarterly reports to the Commission on MPU's efforts to upgrade its facilities to account for the substantial water losses in MPU's prior rate case in Docket No. 02-0371, it is evident that Harold Edwards is the appropriate individual who can fully develop the record in MPU's and WOM's cases on the water loss issues. See reports submitted by H. Edwards dated October 17, 2003, January 13, 2004, April 12, 2004, July 7, 2004, October 12, 2004, April 8, 2005, July 1, 2005, October 3, 2005, January 13, 2006, April 10, 2006, June 23, 2006 filed in Docket No. 02-0371.

will need these witnesses to testify in the WOM proceeding as to the issue of the reasonableness of WOM's requested rates and operating expenses.

DATED: Honolulu, Hawaii, May 5, 2010.

A handwritten signature in black ink, appearing to read 'Margery S. Bronster', is written over a horizontal line.

MARGERY S. BRONSTER
JEANNETTE H. CASTAGNETT
Bronster Hoshibata

BRIAN T. MOTO
JANE E. LOVELL
EDWARD S. KUSHI, JR.
Department of the Corporation Counsel

Attorneys for County of Maui

BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF HAWAII

In the Matter of the Application	)	DOCKET NO. 2009-0049
)	
of)	
)	
WAI'OLA O MOLOKA'I, INC.)	
)	
For review and approval of rate)	
increases; revised rate schedules;)	
and revised rules.)	
_____)	

DECLARATION OF JEANNETTE H. CASTAGNETTI

JEANNETTE H. CASTAGNETTI declares as follows:

1. I am an attorney with the law firm Bronster Hoshibata and I am duly licensed to practice in the State of Hawaii. I am one of the attorneys representing the County of Maui in the above-captioned matter and I have personal knowledge of the matters stated herein unless otherwise stated.

1. I am an attorney with Bronster Hoshibata and I am one of the attorneys representing the County of Maui in this proceeding. I am duly licensed to practice in all courts in the State of Hawaii. I have personal knowledge of the matters stated herein.

2. Attached as Exhibit 1 are the County's proposed Witness Subpoenas in accordance with HAR § 6-61-38(d).

3. Attached as Exhibit 2 are true and correct copies of records my office received from the State of Hawaii, Department of Commerce and

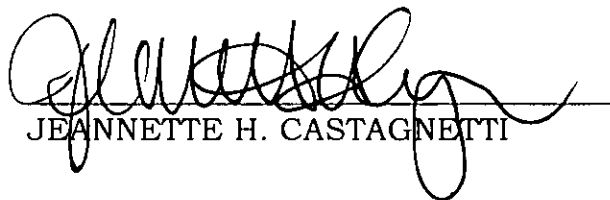
Consumer Affairs, Business Registration Division ("DCCA") reflecting that Harold Edwards was Senior Vice President and a Director of WOM from 2000 to 2006 and was Senior Vice President and a Director of Molokai Public Utilities, Inc. ("MPU") from 2001 to 2005.

4. Attached as Exhibit 3 are true and correct copies of records my office received from the DCCA reflecting that Daniel Orodenger was Secretary of WOM in 2007 (see Officers Addendum) and Secretary of MPU from 2006 to 2007.

5. Attached as Exhibit 4 are true and correct copies of records my office received from the DCCA reflecting that Harold Edwards was Secretary, Vice President and a Director of Molokai Properties, Ltd. ("MPL"), the parent company of MPU and WOM, from 2000 to 2006, and reflecting that Daniel Orodenger was Secretary of MPL in 2007 and Secretary and General Manager of MPL from 2008 to 2009.

I declare under penalty of perjury that the statements made herein are true and correct to the best of my knowledge, information, and belief.

DATED: Honolulu, Hawaii, May 5, 2010.


JEANNETTE H. CASTAGNETTI

BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF HAWAII

In the Matter of the Application	)	DOCKET NO. 2009-0049
)	
of	)	WITNESS SUBPOENA
)	
WAI'OLA O MOLOKA'I, INC.	)	[DANIEL ORODENKER]
)	
For review and approval of rate	)	Hearing Date: May 19, 2010
increases; revised rate schedules;	)	Time: 9:00 a.m.
and revised rules.)	
_____)	

WITNESS SUBPOENA

THE STATE OF HAWAII:

TO THE SHERIFF of the State of Hawaii or his Deputy, or any
Police Officer in the State of Hawaii, or any person not less than 18 years of age
and not a party in the above-entitled matter:

YOU ARE COMMANDED to subpoena DANIEL ORODENKER
whose address is: 745 Fort Street Mall, Honolulu, Hawaii 96813, to personally
appear before the Public Utilities Commission on May 19, 2010 at 9:00 a.m. at
465 S. King Street, Suite B-3, Honolulu, Hawaii to testify.

The testimony of the witness is relevant to the proposed rate
increase, in that the witness may either rebut or corroborate the claims of
Wai'ola O Moloka'i, Inc. that its proposed rate increases are just and
reasonable.

DATED: Honolulu, Hawaii, May _____, 2010.

Carlito Caliboso, Chair
Public Utilities Commission

EXHIBIT 1

BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF HAWAII

In the Matter of the Application	)	DOCKET NO. 2009-0049
)	
of	)	WITNESS SUBPOENA
)	
WAI'OLA O MOLOKA'I, INC.	)	[HAROLD EDWARDS]
)	
For review and approval of rate	)	Hearing Date: May 19, 2010
increases; revised rate schedules;	)	Time: 9:00 a.m.
and revised rules.)	
_____)	

WITNESS SUBPOENA

THE STATE OF HAWAII:

TO THE SHERIFF of the State of Hawaii or his Deputy, or any
Police Officer in the State of Hawaii, or any person not less than 18 years of age
and not a party in the above-entitled matter:

YOU ARE COMMANDED to subpoena HAROLD EDWARDS whose
address is: 345 Awini Way, Hawaii 96825 to personally appear before the
Public Utilities Commission on May 19, 2010 at 9:00 a.m. at 465 S. King
Street, Suite B-3, Honolulu, Hawaii to testify.

The testimony of the witness is relevant to the proposed rate
increase, in that the witness may either rebut or corroborate the claims of
Wai'ola O Moloka'i, Inc. that its proposed rate increases are just and
reasonable.

DATED: Honolulu, Hawaii, May _____, 2010.

Carlito Caliboso, Chair
Public Utilities Commission

DOMESTIC PROFIT CORPORATION
FILING FEE: \$15.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION

335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2006

CORPORATE NAME AND MAILING ADDRESS:

WAI'OLA O MOLOKA'I, INC.
745 FORT ST STE 600
HONOLULU, HI 96813-3805

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT ST STE 600
HONOLULU, HI 96813-3805

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	250,000	COMMON	1,000

2. NATURE OF BUSINESS:
WATER DISTRIBUTION UTILITY

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.

PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
SRV/S/D	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU HI 96825
V/T/D	SUGIYAMA, ROY	745 FORT ST #600 HONOLULU HI 96813 US
P/D	NICHOLAS, PETER	745 FORT ST #600 HONOLULU HI 96813 US



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

07/20/2006

PETER NICHOLAS

Date _____

Signature _____

07/20/2006 10640429

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION

335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2005

CORPORATE NAME AND MAILING ADDRESS:

WAI'OLA O MOLOKA'I, INC.
745 FORT ST STE 600
HONOLULU, HI 96813-3805

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT ST STE 600
HONOLULU, HI 96813-3805

- 07/27 10541183
1. AUTHORIZED SHARES

CLASS	NUMBER	TOTAL NUMBER OF SHARES ISSUED	CLASS	NUMBER
COMMON	250,000	COMMON		1,000
 2. NATURE OF BUSINESS:
WATER DISTRIBUTION UTILITY
 3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.
PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
SRV/S/D	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU HI 96825
V/T/D	SUGIYAMA, ROY	745 FORT ST #600 HONOLULU HI 96813 US
P/D	NICHOLAS, PETER	745 FORT ST #600 HONOLULU HI 96813 US



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

07/29/2005
Date _____

PETER A NICHOLAS
Signature _____

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street
Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2004

CORPORATE NAME AND MAILING ADDRESS:

WAI'OLA O MOLOKA'I, INC.
745 FORT ST STE 600
HONOLULU, HI 96813-3805

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT ST STE 600
HONOLULU, HI 96813-3805

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	250,000	COMMON	1,000

2. NATURE OF BUSINESS:
WATER DISTRIBUTION UTILITY

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.

PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
SRV/S/D	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU HI 96825
V/T/D	SUGIYAMA, ROY	745 FORT ST #600 HONOLULU HI 96813 US
P/D	NICHOLAS, PETER	745 FORT ST #600 HONOLULU HI 96813 US



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

07/12/2004

ROY SUGIYAMA

Date _____

Signature _____

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

Internet Filing

SYL

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
1010 Richards Street
Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2003

CORPORATE NAME AND MAILING ADDRESS:

WAI'OLA O MOLOKA'I, INC.
745 FORT ST STE 600
HONOLULU, HI 96813-3805

If address of principal office differs from the above mailing address, state the address of the principal office.

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	250,000	COMMON	1,000

2. NATURE OF BUSINESS:
WATER DISTRIBUTION UTILITY

3. Street address of the registered office in Hawaii and the name of the registered agent at that address:
PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
D/P	NICHOLAS, PETER	745 FORT ST #600 HONOLULU, HI 96813
D/S/SRV	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU, HI 96813
D/V/T	SUGIYAMA, ROY	745 FORT ST #600 HONOLULU, HI 96813



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

09/13/2003
Date

KATHLEEN YONAOSHI
Signature

C/SYL

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
1010 Richards Street

RETURN ORIGINAL BY MARCH 31
PENALTY FOR LATE FILING

H SI

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI. 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ENDED DECEMBER 31, 2001

CORPORATE NAME AND MAILING ADDRESS:

WAI'OLA O MOLOKA'I, INC.
~~HARBOR COURT~~
~~55 MERCHANT ST STE 2000~~
HONOLULU HI 96813 - 4306

745 Fort Street, Suite 600
Honolulu, HI 96813-3805

If above mailing address has changed, line out and print change to the right.

If address of principal office differs from the above mailing address, state the address of the principal office. Give Number, Street, City, State and Zip Code:

1. AUTHORIZED CAPITAL		PAID-IN CAPITAL (NUMBER OF SHARES ISSUED)	
CLASS	NUMBER	CLASS	NUMBER
COMMON	250,000	COMMON	1,000

To correct the above capital(s), line out and print the correct class and numbers on the right.

2. NATURE OF BUSINESS:

WATER DISTRIBUTION UTILITY

(To correct, line out and print corrections below. If inactive during the period, state INACTIVE.)

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (See reverse for instructions.) (If any change, line out and print change on the right.)

04/04/02
P/S
AT
D
OFFICERS/DIRECTORS: (List all officers and directors. To correct, line out and print corrections on the right. See reverse for instructions.)
OFFICE HELD/ NAME IN FULL ADDRESS (INCLUDE CITY, STATE & ZIP CODE)
DIRECTOR CODE

MOLEY, JAMES W JR
KAWAHAKUI, DON
EDWARDS, HAROLD
WHITING, SCOTT
SUGIYAMA, ROY
HAIGHT, WARREN G

102 ROYAL CIR
95-729 MAIAKU ST
345 AWINI WAY
1186 KAHILI ST
3424 KAAU ST
319 LALA PL

HONOLULU HI 96816
MILILANI HI 96789
HONOLULU HI 96825
KAILUA HI 96734
HONOLULU HI 96816
KAILUA HI 96741

☐ NO CHANGES: Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

C/SI

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

DATE: 3-5-02

Scott D. Whiting

Scott D. Whiting
Print Name

FILE NO. 0084799D1
Rev. 1/2002

Signature of authorized officer, attorney-in-fact
for an officer, or receiver or trustee
(if the corporation is in the hands of a receiver or trustee)

B17
B22

2001



File this original
(SEE REVERSE SIDE FOR INSTRUCTIONS)



DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
1010 Richards Street

RETURN ORIGINAL BY MARCH 31
PENALTY FOR LATE FILING

H
JMCK

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI. 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ENDED DECEMBER 31, 2000 CORPORATE NAME AND MAILING ADDRESS:

WAI'OLA O MOLOKA'I, INC.
HARBOR COURT
55 MERCHANT ST STE 2000
HONOLULU HI 96813 - 4306

If the above mailing address has changed, line out address and type or print the new address on the following line.
Include City, State, and Zip Code:

1. AUTHORIZED CAPITAL		PAID-IN CAPITAL (NUMBER OF SHARES ISSUED)	
CLASS	NUMBER	CLASS	NUMBER
COMMON	250,000	COMMON	1,000

To correct the above capital(s), line out and print the correct class and numbers on the right.

2. NATURE OF BUSINESS:
WATER DISTRIBUTION UTILITY
(To correct, line out and print corrections below. If inactive during the period, state INACTIVE.)

3. Street address of the registered office in Hawaii and the name of the registered agent at that address.
(See reverse for instructions.) (If any change, line out and print change on the right.)

OFFICERS/DIRECTORS: (List all officers and directors. To correct, line out and print corrections on the right. See reverse for instructions.)
OFFICE HELD/ NAME IN FULL ADDRESS (INCLUDE CITY, STATE & ZIP CODE)
DIRECTOR CODE

D	MOZLEY, JAMES W JR	132 ROYAL CIR	HONOLULU HI 96816
T	KAWAHAKUI, DON	95-729 MAIAKU ST	MILILANI HI 96789
	EDWARDS, HAROLD	345 AWINI WAY	HONOLULU HI 96828
	WHITING, SCOTT	1186 KAHILI ST	KAILUA HI 96734
	MIYAKE, JOAN	68-655 KAHAPUNA ST	AIEA HI 96701 delete
AT	SUGIYAMA, ROY	3424 KAAU ST	HONOLULU HI 96816
D	HAIGHT, WARREN G	319 LALA PL	KAILUA HI 96734

☐ NO CHANGES: Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 415-136, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

DATE: 3/1/01


Vice President & Treasurer

Signature of authorized officer, attorney-in-fact
for an officer, or receiver or trustee
(if the corporation is in the hands of a receiver or trustee)

FILE NO.0084799D1
Rev. 1/2001



File this original
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2000



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DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

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DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION

335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: October 1, 2005

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PUBLIC UTILITIES, INC.
745 FORT STREET STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT STREET STE 600
HONOLULU, HI 96813

1. AUTHORIZED SHARES
- | CLASS | NUMBER | TOTAL NUMBER OF SHARES ISSUED | CLASS | NUMBER |
|--------|--------|-------------------------------|-------|--------|
| COMMON | 1,000 | COMMON | 1,000 | |
2. NATURE OF BUSINESS:
WATER SUPPLY SERVICE
3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.
PETER NICHOLAS
HAWAII TOWER, SUITE 600
745 FORT ST MALL
HONOLULU, HI 96813-3800
4. OFFICERS/DIRECTORS
- | Office Held/
Director Code | Name in Full | Address |
|-------------------------------|-----------------|--|
| SRV/D | EDWARDS, HAROLD | HAWAII TOWER STE 600 745 FORT ST MALL
HONOLULU HI 96813-3800 US |
| T/CO/D | SUGIYAMA, ROY | HAWAII TOWER STE 600 745 FORT ST MALL
HONOLULU HI 96813-3800 US |
| P/S/D | NICHOLAS, PETER | HAWAII TOWER SUITE 600 745 FORT ST MALL
HONOLULU HI 96813-3800 US |



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

10/17/2005

PETER NICHOLAS

10/17
10548067

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street
Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: October 1, 2004

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PUBLIC UTILITIES, INC.
745 FORT STREET STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT STREET STE 600
HONOLULU, HI 96813

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	1,000	COMMON	1,000

2. NATURE OF BUSINESS:
WATER SUPPLY SERVICE

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.

PETER NICHOLAS
P O BOX 26
MAUNALO, HI 96770

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
SRV/D	EDWARDS, HAROLD	HAWAII TOWER STE 600 745 FORT ST MALL HONOLULU HI 96813-3800 US
T/CO/D	SUGIYAMA, ROY	HAWAII TOWER STE 600 745 FORT ST MALL HONOLULU HI 96813-3800 US
P/S/D	NICHOLAS, PETER	HAWAII TOWER SUITE 600 745 FORT ST MALL HONOLULU HI 96813-3800 US



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

10/22/2004

PETER NICHOLAS

Date _____

Signature _____

10/22/2004 10:48:56

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

JP

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
1010 Richards Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: October 1, 2003

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PUBLIC UTILITIES, INC.
745 FORT STREET STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	1,000	COMMON	1,000

2. NATURE OF BUSINESS:
WATER SUPPLY SERVICE

3. Street address of the registered office in Hawaii and the name of the registered agent at that address:
PETER NICHOLAS
✓ HAWAII TOWER, SUITE 600
745 FORT ST MALL
HONOLULU, HI 96813-3800

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
D/P/S	NICHOLAS, PETER	HAWAII TOWER, SUITE 600 745 FORT ST MALL, HONOLULU, HI 96813-3800
D/SRV	EDWARDS, HAROLD	HAWAII TOWER, SUITE 600 745 FORT ST MALL, HONOLULU, HI 96813-3800
D/T/CO	SUGIYAMA, ROY	HAWAII TOWER, SUITE 600 745 FORT ST MALL, HONOLULU, HI 96813-3800



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

C/JP

10/27/2003

PETER NICHOLAS

Date _____

Signature _____

10/27/2003 10:34:2430

DOMESTIC PROFIT CORPORATION

FILING FEE \$25.00

SJ

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISIONRETURN ORIGINAL BY MARCH 31
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1010 Richards Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI. 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ENDED DECEMBER 31, 2001

CORPORATE NAME AND MAILING ADDRESS:

✓ MOLOKAI PUBLIC UTILITIES, INC.P.O. BOX 26MAUNALOA HI 96770

745 Fort Street, Suite 600

Honolulu, HI 96813

If above mailing address has changed, line out and print change to the right.

If address of principal office differs from the above mailing address, state the address of the principal office. Give Number, Street, City, State and Zip Code:

1. AUTHORIZED CAPITAL

CLASS
COMMONNUMBER
1,000

PAID-IN CAPITAL (NUMBER OF SHARES ISSUED)

CLASS
COMMONNUMBER
1,000

To correct the above capital(s), line out and print the correct class and numbers on the right.

2. NATURE OF BUSINESS:

WATER SUPPLY SERVICE

(To correct, line out and print corrections below. If inactive during the period, state INACTIVE.)

3. Street address of the registered office in Hawaii and the name of the registered agent at that address.
(See reverse for instructions.) (If any change, line out and print change on the right.)KUKUI (MOLOKAI) INC.P.O. BOX 26MAUNALOA HI 96770

OFFICERS/DIRECTORS: (List all officers and directors. To correct, line out and print corrections on the right. See reverse for instructions.)

OFFICE HELD/ NAME IN FULL
DIRECTOR CODE

ADDRESS (INCLUDE CITY, STATE & ZIP CODE)

P/S/D	POOTTA, YASHIRO	445 S FIGUEROA ST STE 2570	LOS ANGELES CA 90071
EV	DEED, BUDDY	1949 KATNOT DR	KAILUA HI 96734
P/S/D	Whiting, Scott	1186 Kahili St.	Kailua, HI 96734
V	Edwards, Harold	345 Awini Way	Honolulu, HI 96825
V/T	Kawahakui, Don	95-729 Maiaku St.	Mililani, HI 96789
AT	Sugiyama, Roy	3424 Kaau St.	Honolulu, HI 96816
D	Haight, Warren	319 Lala Pl.	Kailua, HI 96734

☐ NO CHANGES: Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

DATE: MAR 28 2002

Scott Whiting

Print Name

SJ

FILE NO.0037714D1

Rev. 1/2002

Signature of authorized officer, attorney-in-fact
for an officer, or receiver or trustee
(if the corporation is in the hands of a receiver or trustee)

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STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

BUSINESS REGISTRATION DIVISION

335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

PH

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF July 1, 2007

CORPORATION NAME AND MAILING ADDRESS

WAI'OLA O MOLOKA'I, INC.
745 FORT ST STE 600
HONOLULU HI 96813-3805

Principal Office Address

745 FORT ST STE 600
HONOLULU HI 96813-3805

1. AUTHORIZED SHARES

CLASS	NUMBER
COMMON	250,000

TOTAL NUMBER OF SHARES ISSUED

CLASS	NUMBER
COMMON	1,000

2. Nature of Business

WATER DISTRIBUTION UTILITY

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. After any changes made, the street addresses of its registered office and agent shall be identical.

PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU HI 96813

4. List all officers and directors.

Office Held	Full Name	Address
D	SUGIYAMA, ROY	745 FORT ST #600, HONOLULU HI 96813
P/D	NICHOLAS, PETER	745 FORT ST #600, HONOLULU HI 96813
V	JOHN SABAS	745 FORT STREET SUITE 600, HONOLULU HI 96813
T	DENNIS IKEDA	745 FORT STREET SUITE 600, HONOLULU HI 96813

CONTINUED ON OFFICERS ADDENDUM



NO CHANGES

Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.

C/PH

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

July 23, 2007

Date

PETER NICHOLAS

Signature of authorized officer, attorney-in-fact for an officer, or
receiver or trustee (if the corporation is in the hands of a receiver or
trustee)

PETER NICHOLAS

Print Name

FILE NO. 84799 D1

Rev. 2/2005

B17

B22

EXHIBIT 3

07/2 20740118

OFFICERS ADDENDUM

Offices Held	Full Name	Address
S	DANIEL ORODENKER	745 FORT STREET SUITE 600, HONOLULU HI 96813

07/23/ 740118

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

BUSINESS REGISTRATION DIVISION

335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF October 1, 2007

CORPORATION NAME AND MAILING ADDRESS

MOLOKAI PUBLIC UTILITIES, INC.
745 FORT STREET STE 600
HONOLULU HI 96813

Principal Office Address

745 FORT STREET STE 600
HONOLULU HI 96813

1. AUTHORIZED SHARES

CLASS	NUMBER
COMMON	1,000

TOTAL NUMBER OF SHARES ISSUED

CLASS	NUMBER
COMMON	1,000

2. Nature of Business

WATER SUPPLY SERVICE

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. After any changes made, the street addresses of its registered office and agent shall be identical.

PETER NICHOLAS
HAWAII TOWER, SUITE 600
745 FORT ST MALL
HONOLULU HI 96813-3800

4. List all officers and directors.

Offices Held	Full Name	Address
T/D/CO	SUGIYAMA, ROY	HAWAII TOWER STE 600, 745 FORT ST MALL, HONOLULU HI 96813-3800
P/D	NICHOLAS, PETER	745 FORT ST STE 600, HONOLULU HI 96813
S	ORODENKER, DANIEL	745 FORT ST STE 600, HONOLULU HI 96813



NO CHANGES

Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

October 17, 2007

PETER NICHOLAS

PETER NICHOLAS

Date

Signature of authorized officer, attorney-in-fact for an officer, or receiver or trustee (if the corporation is in the hands of a receiver or trustee)

Print Name

FILE NO. 37714 D1

Rev. 7/2007

2007 B17

B22



10/17 10744449

SYL

STATE OF HAWAII
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street
Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: October 1, 2006

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PUBLIC UTILITIES, INC.
745 FORT STREET STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT STREET STE 600
HONOLULU, HI 96813

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	1,000	COMMON	1,000

2. NATURE OF BUSINESS:
WATER SUPPLY SERVICE

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.

PETER NICHOLAS
HAWAII TOWER, SUITE 600
745 FORT ST MALL
HONOLULU, HI 96813-3800

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
T/CO/D	SUGIYAMA, ROY	HAWAII TOWER STE 600 745 FORT ST MALL HONOLULU HI 96813-3800 US
✓ D/P	NICHOLAS, PETER	745 FORT STREET SUITE 600, HONOLULU, HI 96813
S	ORODENKER, DANIEL	745 FORT STREET SUITE 600, HONOLULU, HI 96813



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

12/07/2006
Date

PETER NICHOLAS

C/SYL Signature

12/07/2006 16:41:17

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MOLOKAI PROPERTIES LIMITED

DOMESTIC PROFIT CORPORATION

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Officers

NAME	OFFICE ▼	DATE
NICHOLAS,PETER A	P/D/ED	Jul 1, 2009
MING,ANDREW CHEW KWANG	V/D	Sep 23, 2009
ORODENKER,DANIEL	S/D/GM	Sep 23, 2009
HAMMOND,ELAINE	T	Sep 23, 2009

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Handwritten signature

EXHIBIT 4

SW

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street
Mailing Address: Annual Filing, P.O. Box 40, Honolulu, HI 96810

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF July 1, 2009

CORPORATION NAME AND MAILING ADDRESS

✓ MOLOKAI PROPERTIES LIMITED
119 MERCHANT ST STE 408
HONOLULU HI 96813

Principal Office Address

✓ 119 MERCHANT ST STE 408
HONOLULU HI 96813

1. AUTHORIZED SHARES

CLASS NUMBER
COMMON 1,600,000

TOTAL NUMBER OF SHARES ISSUED

CLASS NUMBER
COMMON 100

2. Nature of Business

RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE DEVELOPMENT

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. After any changes made, the street addresses of its registered office and agent shall be identical.

✓ DANIEL ORODENKER
119 MERCHANT ST STE 408
HONOLULU HI 96813

4. List all officers and directors.

Offices Held	Full Name	Address
P/D/ED	NICHOLAS, PETER A.	119 MERCHANT STREET, SUITE 408, HONOLULU HI 96813
T	HAMMOND, ELAINE	119 MERCHANT STREET, SUITE 408, HONOLULU HI 96813
D	LIM, RICHARD	119 MERCHANT STREET, SUITE 408, HONOLULU HI 96813
S/D/GM	ORODENKER, DANIEL	119 MERCHANT STREET, SUITE 408, HONOLULU HI 96813



NO CHANGES

Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.

C/SW

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

July 13, 2009

EKLAIN HAMMOND

EKLAIN HAMMOND

Date

Signature of authorized officer, attorney-in-fact for an officer, or receiver or trustee (if the corporation is in the hands of a receiver or trustee)

Print Name

FILE NO. 260 D1

Rev. 11/2008

2009 B17

B22



07/1 10942772

SJ

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

BUSINESS REGISTRATION DIVISION

335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF July 1, 2008

CORPORATION NAME AND MAILING ADDRESS

MOLOKAI PROPERTIES LIMITED
745 FORT ST STE 600
HONOLULU HI 96813

Principal Office Address

745 FORT ST STE 600
HONOLULU HI 96813

1. AUTHORIZED SHARES

CLASS	NUMBER
COMMON	1,600,000

TOTAL NUMBER OF SHARES ISSUED

CLASS	NUMBER
COMMON	100

2. Nature of Business

RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE DEVELOPMENT

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. After any changes made, the street addresses of its registered office and agent shall be identical.

DANIEL ORODENKER
745 FT ST MALL STE 600
HONOLULU HI 96813

4. List all officers and directors.

Offices Held	Full Name	Address
P/ED/D	NICHOLAS,PETER A.	745 FORT STREET, SUITE 600, HONOLULU HI 96813
T	HAMMOND,ELAINE	745 FORT STREET, SUITE 600, HONOLULU HI 96813
D	LIM,RICHARD	745 FORT STREET, SUITE 600, HONOLULU HI 96813
GM/S/D	ORODENKER,DANIEL	745 FORT STREET, SUITE 600, HONOLULU HI 96813



NO CHANGES

Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

October 10, 2008

ELAINE HAMMOND

ELAINE HAMMOND

Date

Signature of authorized officer, attorney-in-fact for an officer, or
receiver or trustee (if the corporation is in the hands of a receiver or
trustee)

Print Name

FILE NO. 260 D1

Rev. 7/2007

2008

B17

B22



10/11 0841677

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

BUSINESS REGISTRATION DIVISION

335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

SYL

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF July 1, 2007

CORPORATION NAME AND MAILING ADDRESS

MOLOKAI PROPERTIES LIMITED
745 FORT ST STE 600
HONOLULU HI 96813

Principal Office Address

745 FORT ST STE 600
HONOLULU HI 96813

1. AUTHORIZED SHARES

CLASS	NUMBER
COMMON	1,600,000

TOTAL NUMBER OF SHARES ISSUED

CLASS	NUMBER
COMMON	100

2. Nature of Business

RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE DEVELOPMENT

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. After any changes made, the street addresses of its registered office and agent shall be identical.

PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU HI 96813

4. List all officers and directors.

Officer Held	Full Name	Address
V	SUGIYAMA, ROY	745 FORT ST #600, HONOLULU HI 96813
P/D	NICHOLAS, PETER A	745 FORT ST #600, HONOLULU HI 96813
T	DENNIS IKEDA	745 FORT STREET, SUITE 600, HONOLULU HI 96813
S	DANIEL ORODENKER	745 FORT STREET, SUITE 600, HONOLULU HI 96813



NO CHANGES

Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

July 20, 2007

Date

PETER NICHOLAS

Signature of authorized officer, attorney-in-fact for an officer, or receiver or trustee (if the corporation is in the hands of a receiver or trustee)

PETER NICHOLAS

Print Name

C/SYL

FILE NO. 260 D1
Rev. 2/2005

B17
B22

07/20/07 10744943

DOMESTIC PROFIT CORPORATION
FILING FEE: \$15.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2006

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PROPERTIES LIMITED
745 FORT ST STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT ST STE 600
HONOLULU, HI 96813

1. AUTHORIZED SHARES
- | CLASS | NUMBER | TOTAL NUMBER OF SHARES ISSUED | CLASS | NUMBER |
|--------|-----------|-------------------------------|-------|--------|
| COMMON | 1,600,000 | COMMON | | 100 |
2. NATURE OF BUSINESS:
RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE DEVELOPMENT
3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.
PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813
4. OFFICERS/DIRECTORS
- | Office Held/
Director Code | Name in Full | Address |
|-------------------------------|-------------------|--|
| S/V/D | EDWARDS, HAROLD | 745 FORT ST #600 HONOLULU HI 96813 US |
| V/T | SUGIYAMA, ROY | 745 FORT ST \$600 HONOLULU HI 96813 US |
| P/D | NICHOLAS, PETER A | 745 FORT ST #600 HONOLUU HI 96713 US |
| D | DARVENIZA, MARTIN | 745 FORT ST #6000 HONOLULU HI 96813 US |
| D | LOW, ROCH | 745 FORT ST #600 HONOLULU HI 96813 US |



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

07/20/2006

PETER NICHOLAS

Date _____

Signature _____

07/20/2006 10:06:40:26

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2005

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PROPERTIES LIMITED
745 FORT ST STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT ST STE 600
HONOLULU, HI 96813

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	1,600,000	COMMON	100

2. NATURE OF BUSINESS:
RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE DEVELOPMENT

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.

PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name In Full	Address
S/V/D	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU HI 96813 US
V/T	SUGIYAMA, ROY	745 FORT ST \$600 HONOLULU HI 96813 US
P/D	NICHOLAS, PETER A	745 FORT ST #600 HONOLUU HI 96713 US
D	DARVENIZA, MARTIN	745 FORT ST #6000 HONOLULU HI 96813 US
D	LOW, ROCH	745 FORT ST #600 HONOLULU HI 96813 US



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

07/29/2005
Date _____

PETER A NICHOLAS
Signature _____

07/29/2005 10:54:18 AM

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2004

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PROPERTIES LIMITED
745 FORT ST STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

745 FORT ST STE 600
HONOLULU, HI 96813

1. AUTHORIZED SHARES		TOTAL NUMBER OF SHARES ISSUED	
CLASS	NUMBER	CLASS	NUMBER
COMMON	1,600,000	COMMON	100

2. NATURE OF BUSINESS:
RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE DEVELOPMENT

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.) After any changes made, the street addresses of its registered office and agent shall be identical.

PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
SV/D	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU HI 96813 US
V/T	SUGIYAMA, ROY	745 FORT ST \$600 HONOLULU HI 96813 US
P/D	NICHOLAS, PETER A	745 FORT ST #600 HONOLUU HI 96713 US
D	DARVENIZA, MARTIN	745 FORT ST #6000 HONOLULU HI 96813 US
D	LOW, ROCH	745 FORT ST #600 HONOLULU HI 96813 US



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

07/12/2004

ROY SUGIYAMA

Date _____

Signature _____

07/1

10447413

DOMESTIC PROFIT CORPORATION
FILING FEE: \$25.00

STATE OF HAWAII

Internet Filing

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
1010 Richards Street

SYL

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF: July 1, 2003

CORPORATE NAME AND MAILING ADDRESS:

MOLOKAI PROPERTIES LIMITED
745 FORT ST STE 600
HONOLULU, HI 96813

If address of principal office differs from the above mailing address, state the address of the principal office.

1. AUTHORIZED SHARES
- | CLASS | NUMBER | TOTAL NUMBER OF SHARES ISSUED | CLASS | NUMBER |
|--------|-----------|-------------------------------|--------|--------|
| COMMON | 1,600,000 | | COMMON | 100 |
2. NATURE OF BUSINESS:
RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE DEVELOPMENT
3. Street address of the registered office in Hawaii and the name of the registered agent at that address:
PETER A NICHOLAS
745 FORT STREET MALL SUITE 600
HONOLULU, HI 96813

4. OFFICERS/DIRECTORS

Office Held/ Director Code	Name in Full	Address
SV/D	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU HI 96813 US
V/T	SUGIYAMA, ROY	745 FORT ST \$600 HONOLULU HI 96813 US
P/D	NICHOLAS, PETER A	745 FORT ST #600 HONOLUU HI 96713 US
D	DARVENIZA, MARTIN	745 FORT ST #6000 HONOLULU HI 96813 US
D	LOW, ROCH	745 FORT ST #600 HONOLULU HI 96813 US
S	EDWARDS, HAROLD	745 FORT ST #600 HONOLULU, HI 96813



NO CHANGES:

Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

09/13/2003
Date

HAROLD EDWARDS
Signature

C/SYL

09/1 00347265

DOMESTIC PROFIT CORPORATION

FILING FEE \$25.00

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISIONRETURN ORIGINAL BY MARCH 31
PENALTY FOR LATE FILING

H

1010 Richards Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI. 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ENDED DECEMBER 31, 2001

CORPORATE NAME AND MAILING ADDRESS:

~~MOLOKAI RANCH, LIMITED~~
~~HARBOR COURT~~
~~55 MERCHANT ST STE 2000~~
HONOLULU HI 96813745 Fort Street, Suite 600
Honolulu, HI 96813

B17 00157740

2 21 PM '02

25.00

If above mailing address has changed, line out and print change to the right.

If address of principal office differs from the above mailing address, state the address of the principal office. Give Number, Street, City, State and Zip Code:

1. AUTHORIZED CAPITAL

CLASS
COMMONNUMBER
1,600,000

PAID-IN CAPITAL (NUMBER OF SHARES ISSUED)

CLASS
COMMONNUMBER
100

To correct the above capital(s), line out and print the correct class and numbers on the right.

2. NATURE OF BUSINESS:

RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE

(To correct, line out and print corrections below. If inactive during the period, state INACTIVE.)

3. Street address of the registered office in Hawaii and the name of the registered agent at that address.
(See reverse for instructions.) (If any change, line out and print change on the right.)OFFICERS/DIRECTORS: (List all officers and directors. To correct, line out and print corrections on the right. See reverse for instructions.)
OFFICE HELD/ NAME IN FULL ADDRESS (INCLUDE CITY, STATE & ZIP CODE)
DIRECTOR CODE

	MOZLEY, JAMES W	132 ROYAL CIR	HONOLULU HI 96816
	KAWAHAKUI, DON	95-728 MAIAKU ST	MILILANI HI 96788
	EDWARDS, HAROLD	345 AWINI WAY	HONOLULU HI 96825
	WHITING, SCOTT	1186 KAHILI ST	KAILUA HI 96734
	SUGIYAMA, ROY	3424 KAAU ST	HONOLULU HI 96816
P	GREEN, JOHN	2 LEONIE HILL #24 OG LEONIE	GONDOTEL SINGAPORE 239192
D	HAIGHT, WARREN	318 LALA PL	KAILUA HI 96734
D	REID, RICHARD	3 KINGSMAN RD	SINGAPORE 267857
D	Riley, Robert	6 Ashley Ave, Park City, UT	84060
D	Shepherd, Andrew	20 Collyer Quay, #16-02/03 Tung Centre,	Singapore 049319

☐ NO CHANGES: Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

DATE: MAR 6 2002

President

Scott Whiting
Print NameSignature of authorized officer, attorney-in-fact
for an officer, or receiver or trustee

(if the corporation is in the hands of a receiver or trustee)

FILE NO. 0000260D1
Rev. 1/2002

2001

B17 25
B22File this original
(SEE REVERSE SIDE FOR INSTRUCTIONS)

DOMESTIC PROFIT CORPORATION

FILING FEE \$25.00

STATE OF HAWAII

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISIONRETURN ORIGINAL BY MARCH 31
PENALTY FOR LATE FILING

H

1010 Richards Street

Mailing Address: Annual Filing, P.O. Box 113600, Honolulu, HI. 96811

DOMESTIC PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR ENDED DECEMBER 31, 2000
CORPORATE NAME AND MAILING ADDRESS:MOLOKAI RANCH, LIMITED
HARBOR COURT
55 MERCHANT ST STE 2000
HONOLULU HI 96813

917 00433708 3- 5/18/01 25.00

If the above mailing address has changed, line out address and type or print the new address on the following line.
Include City, State, and Zip Code:

1. AUTHORIZED CAPITAL

CLASS
COMMONNUMBER
1,600,000

PAID-IN CAPITAL (NUMBER OF SHARES ISSUED)

CLASS
COMMONNUMBER
100

To correct the above capital(s), line out and print the correct class and numbers on the right.

2. NATURE OF BUSINESS:

RANCHING AND RENTALS, AGRICULTURAL DEVELOPMENT, REAL ESTATE

(To correct, line out and print corrections below. If inactive during the period, state INACTIVE.)

3. Street address of the registered office in Hawaii and the name of the registered agent at that address.
(See reverse for instructions.) (If any change, line out and print change on the right.)

4. OFFICERS/DIRECTORS: (List all officers and directors. To correct, line out and print corrections on the right. See reverse for instructions.)

OFFICE HELD/
DIRECTOR CODE

NAME IN FULL

ADDRESS (INCLUDE CITY, STATE & ZIP CODE)

DO	MOZLEY, JAMES W.	132 ROYAL CIR	HONOLULU HI 96816
AT	KAWAHAKUI, DON	95-729 MALAKU ST	MILILANI HI 96789
AS	EDWARDS, HAROLD	345 AWINI WAY	HONOLULU HI 96825
AS	WHITING, SCOTT	1186 KAHILI ST	KAILUA HI 96734
AS	MIYAKE, JOAN	96-858 KANAPALI ST	WAILUA HI 96791 delete
AT	SUGIYAMA, ROY	3424 KAAU ST	HONOLULU HI 96816
D	GREEN, JOHN	2 LEONIE HILL #24-06 LEONIE	CONDOTEL SINGAPORE 239192
D	HAIGHT, WARREN	319 LALA PL	KAILUA HI 96734
D	REID, RICHARD	2 KINGSMEAD RD	SINGAPORE 267957

☐ NO CHANGES: Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

CERTIFICATION

I certify under the penalties of Section 415-136, Hawaii Revised Statutes, that I have read the information is true and correct, and I am authorized to sign this report.

DATE: 3/1/01

Vice President & Treasurer

Signature of authorized officer, attorney-in-fact
for an officer, or receiver or trustee

(if the corporation is in the hands of a receiver or trustee)

FILE NO.0000260D1
Rev. 1/2001Don Kawahakui
Print NameB17 25
B22

2000

File this original

(SEE REVERSE SIDE FOR INSTRUCTIONS)



BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF HAWAII

In the Matter of the Application	)	DOCKET NO. 2009-0049
)	
of)	
)	
WAI'OLA O MOLOKAI, INC.)	
)	
For review and approval of rate)	
increases; revised rate schedules;)	
and revised rules.)	
_____)	

CERTIFICATE OF SERVICE

Pursuant to Hawaii Administrative Rules § 6-61-21(d), the undersigned certifies that a true and correct copy of the foregoing document was duly served on the following parties on May 5, 2010, at their last known addresses in the manner specified below:

MICHAEL H. LAU, ESQ.
YVONNE Y. IZU, ESQ.
Moriwara Lau & Fong
Davies Pacific Center
841 Bishop Street, Suite 400
Honolulu, Hawaii 96813
Attorneys for Applicant
MOLOKAI PUBLIC UTILITIES, INC.

Email and U.S. Mail
mlau@moriwara.com
yizu@moriwara.com


DEAN K. NISHINA
Executive Director
Consumer Advocate
Department of Commerce and Consumer Affairs
Division of Consumer Advocacy
335 Merchant Street, Room 326
Honolulu, Hawaii 96813

Email and U.S. Mail
(3 copies)
dean.k.nishina@dcca.hawaii.gov

JAMES J. BICKERTON, ESQ.
Bickerton Lee Dang & Sullivan
Topa Financial Center, Fort Street Tower
745 Fort Street, Suite 801
Honolulu, Hawaii 96813
Attorney for MOLOKAI PROPERTIES, LTD.

Email and U.S. Mail
bickerton@bsds.com

DATED: Honolulu, Hawaii, May 5, 2010.



MARGERY S. BRONSTER
JEANNETTE H. CASTAGNETTI
Bronster Hoshibata

BRIAN T. MOTO
JANE E. LOVELL
EDWARD S. KUSHI, JR.
Department of the Corporation Counsel

Attorneys for County of Maui